

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

☐ Ms.

☐ yes

☐ no

☒ Mr. Artist

Michael S. Bakale

(Last Name Last)

Permanent

Address

354 21 Lake Shore, Erie Pa

Street

City

41074

Zip

Tel. () 216-851-4942

Area Code

Temporary

Address

Street

City

Tel. ()

Zip

Area Code

Permanent address is in what county?

Lake

Born in Cuyahoga County

☒ Yes

☐ No

Collaborator

(if Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum

☐ Museum should dispose of

☐ Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until June 15, 1975.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature

Michael S. Bakale

ENTRY BLANKS

1

☐ 1. Paintings
☐ 2. Graphics
☒ 3. Photography
☐ 4. Sculpture
☐ 5. Electric
☐ 6. Crafts

Medium or Materials

RECEIVED

Black & white Photos

4-14-75

Title

Inversion

Price or NFS

\$50-

Insurance Value

If NFS Only

Size

14x20

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. In Edition	Price Unframed	Price of Frames
9	10	\$30-	\$20-

DO NOT WRITE IN THIS SECTION

170 (3)

ACCEPTED

REJECTED

FEE PAID

BY

3/20

PLW

2

☐ 1. Paintings
☐ 2. Graphics
☒ 3. Photography
☐ 4. Sculpture
☐ 5. Electric
☐ 6. Crafts

Medium or Materials

Black & white Photos

Title

Chipmunk

Price Framed or NFS

\$25-

Insurance Value

If NFS Only

Size

9x11

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. In Edition	Price Unframed	Price of Frame
19	20	\$10	\$15

DO NOT WRITE IN THIS SECTION

171 (3)

ACCEPTED

REJECTED

RECEIVED

BY

3/20

PLW

DO NOT DETACH

1975 MAY SHOW

The Cleveland Museum of Art

Cleveland, Ohio 44106

Dates for Pick-up of Objects

Museum Service Entrance

9:30 a.m. to 4:30 p.m., Monday through Saturday

Rejected Objects

April 14 through April 26

Accepted Objects

June 23 through June 28

It is understood that the Museum will have the right to dispose for its own account any object not called for by the dates listed.

Please keep address within this box for window envelope.

Name	Michael S. Bakula
Address	35921 Lake Shore
City & State	Eastlake, Ohio Zip 44094

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

~~Admission Ticket~~
Packaging 4/14 - OJB

DO NOT DETACH

**1**

- ☐ 1. Paintings ☐ 2. Graphics ☒ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

Black & White Photo

Title

Inversion

DO NOT WRITE IN THIS SECTION

170 (3)

ACCEPTED

REJECTED

~~RECEIVED~~~~Michael O'Brien~~

DO NOT DETACH

**2**

- ☐ 1. Paintings ☐ 2. Graphics ☒ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

Black & White Photo

Title

Chipmunk

DO NOT WRITE IN THIS SECTION

171 (3)

ACCEPTED

REJECTED